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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/428,237 11/22/2002 *tl*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *tl*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>tl</i> Initials <i>tl</i>	STATE OR COUNTRY CANADA	SHEETS DRAWING 15	TOTAL CLAIMS <i>25</i>	INDEPENDENT CLAIMS <i>5</i>
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ADDRESS

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TITLE  
 Refrigeration monitor

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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